# FORM D

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering	(☐ check if this is an a		•	<del>-</del> .	129	10125
Filing Under (Check	( box(es) that apply):	☐ Rule 504	Rule 505	⊠ Rule 506	Section 4(6)	ULOE
Type of Filing:	New Filing	☐ Amendment				
		A. BASIC	DENTIFICAT	ION DATA		
1. Enter the infor	mation requested about th	e issuer				
Name of Issuer	check if this is an a	mendment and name h	as changed, and in	dicate change.		-
ABIM Partners Equ	uity Fund I, LLC					
Address of Executiv	ve Offices		(Number and Stre	et, City, State, Zip C	ode) Telephone	Number (Including Area Code)
c/o Alex. Brown in	vestment Management,	217 East Redwood, S	uite 1400, Baltimo	re, Maryland 21201	410-895-48	26
Address of Principa	l Offices		(Number and Stre	et, City, State, Zip C	ode) Telephone	Number (Including Area Code)
(if different from Exe	ecutive Offices)				1	
Brief Description of	Business: Private In	vestment Company				PROCESSED
Tunn of Business O	)i-ation					PROGESTA
Type of Business O	organization  corporation	□ limited r	partnership, already	formed	Mother (please	specifiMAY 18 2004
	business trust	= :	partnership, already		limited liabilty co	mnany
	U pusiness trust		<del></del>		<del></del>	THOMSON FINANCIAL
A -4) F-4:4-4	1 D-1	\	Month	Yea	<del>~~~~</del>	•
	Date of Incorporation or C	L	0 3	0	4 🛮 🖾	Actual Estimated
Jurisdiction of Incor	poration or Organization:					5   5
		Ci	Nitor Canada; FN to	or other foreign juriso	piction)	DE

#### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

# State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

-		A. BASIC I	DENTIFICATION DATA	A	
<ul><li>Each beneficial own</li><li>Each executive office</li></ul>	ne issuer, if the iss ner having the pov cer and director of	uer has been organized will ver to vote or dispose, or di			a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual):	Alex. Brown Investm	ent Management, a Maryla	nd limited partne	ership (Manager)
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 217 East Redwood	l, Suite 1400, Bal	timore, Maryland 21202
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual):	Lee S. Owens			
Business or Residence Addi 1400, Baltimore, Maryland		Street, City, State, Zip Coo	de): c/o Alex. Brown In	vestment Manag	ement, 217 East Redwood, Suite
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual):	Bruce Behrens			
Business or Residence Add 1400, Baltimore, Maryland		Street, City, State, Zip Coo	de): c/o Alex. Brown In	vestment Manag	ement, 217 East Redwood, Suite
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual):	Robert Vernon		· · · · · · · · · · · · · · · · · · ·	
Business or Residence Add 1400, Baltimore, Maryland		Street, City, State, Zip Coo	de): c/o Alex. Brown in	vestment Manag	ement, 217 East Redwood, Suite
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual):		****		
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner

					В.	INFOR	MATION	ABOUT	OFFER	ING			
Has	the issue	r sold, or d	oes the is	suer inter	nd to sell, t Answer	o non-accr also in Ap	edited inve	estors in th	is offering filing under	? ·ULOE	······	☐ Yes	⊠ No
. Wha	at is the mi	inimum inv	estment 1	that will be	e accepted	from any	ndividual?			••••••	·····	\$ <u>3.</u>	000,000 (may be waived)
Des	a tha affai	rina normit	joint own	ershin of:	a sinale un	it?						ZaY ⊠	□No
. Ente	er the infor commission ring. If a p	mation reconnection or similar to the contraction of the contraction o	quested for ar remune pe listed is ates, list the uch a brok	or each pe eration for an assoc ne name o	rson who i solicitation iated person	has been on of purchation or agentation or agentation or deale	or will be pa sers in coa t of a brok r. If more	aid or give nnection w er or deale than five (	n, directly of ith sales of er registere 5) persons	or indirectly f securities d with the to be lister	y, s in the SEC d are		
'ull Nam	e (Last na	me first, if	individual	1)									
lusiness	or Reside	ence Addre	ess (Numb	per and St	reet, City,	State, Zip	Code)					<del></del>	
lame of	Associate	d Broker c	r Dealer		·			·— — — —.					
States in (Ch	eck "All St	ates" or ch	d Has Sol neck indivi	dual State	s)	• • • • • • • • • • • • • • • • • • • •					_		☐ All States
] [AL]		[AZ]							[FL]				
] [IL]	[IN]											[MO] [PA]	
] (MT) ] [RI]	[NE]	☐ [NV] ☐ [SD]	[HN]	[XJ]			[NC]				[OR] [WY]		
			individual										
Business	or Reside	ence Addre	ess (Numb	per and Str	reet, City,	State, Zip	Code)					<del></del> -	
lame of	Associate	d Broker o	or Dealer				<del>,</del> _,						
States in	Which Pe	erson Liste	d Has Soli neck indivi	icited or In	tends to S	olicit Purcl	nasers				<del></del>		☐ All States
(Ci) [AL]			[AR]								[HI]	[10]	El All Otales
] [IL]	[NI]	□ [IA]	[KS]	□ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	. [MS]	[MO]	
(MT]	□ [NE]	[NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	☐ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]	
] [RI]		[SD]		□ [TX]			[AV]	[WA]				□ [PR]	
full Nam	ne (Last na	ame first, if	individual	)									
Busines	s or Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name of	Associate	ed Broker o	or Dealer			<del></del>	<del></del>				<del></del>		
States in	Which Pe	erson Liste	d Has Soli	cited or Inf	tends to S	olicit Purch	nasers						
			neck individual							☐ [GA]	Пинп	□ [ID]	☐ All States
☐ [/L]	[IN]	☐ [A2]	☐ [KS]					☐ [MA]					
(MT) (MT)													
		- '									ПWYI		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCE	EDS	
Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Agginegate Offering Price		Amount Aiready Sold
Debt	. \$		\$	
Equity	<b>.</b> \$		\$	
Common Preferred	· <u></u>		- <del></del>	· · · · · · · · · · · · · · · · · · ·
Convertible Securities (including warrants)	. \$		<u>\$</u> _	
Partnership Interests	. <u>\$</u>	<del> </del>	\$	
Other (Specify)limited liability company interests)	. \$	100,000,000	\$	2,500,000
Total	\$	100,000,000	\$	2,500,000
Answer also in Appendix, Column 3, if filing under ULOE				
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Number Investors		Aggregate Dollar Amount Of Purchases
Accredited Investors	·	3	<u>\$</u>	2,500,000
Non-accredited Investors			\$	
Total (for filings under Rule 504 only)			\$	
Answer also in Appendix, Column 4, if filing under ULOE				
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
Type of Offering		Types of Security		Dollar Amount Sold
Rule 505	٠		\$	
Regulation A			\$	
Rule 504			<u>\$</u>	
Total			\$	
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent's Fees	•••••		\$	
Printing and Engraving Costs			\$	
Legal Fees		🖾	\$	41,509
Accounting Fees		🗀	\$	
Engineering Fees			\$	
Sales Commissions (specify finders' fees separately)	•••••		\$_	

Other Expenses (identify)

Total.....

41,509

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXP	ENSES	AND USE OF P	ROCEEDS	<del></del>
4 .	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to Fadjusted gross proceeds to the issuer."	Part C-Question 4.a. This differe	nce is th	e	<u>\$</u>	99,958,491
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in resp	any purpose is not known, furnish ne total of the payments listed mu	ı an ıst equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	🗆	\$
	Purchase of real estate			\$	0	\$
	Purchase, rental or leasing and installation of mad	chinery and equipment		\$	🗆	\$
	Construction or leasing of plant buildings and facil Acquisition of other businesses (including the value	ue of securities involved in this		\$	🗆	\$
	offering that may be used in exchange for the ass pursuant to a merger	ets or securities of another issue		\$	🗆	\$
	Repayment of indebtedness			\$	🗆	\$
	Working capital			\$	🛛	\$99,958,491
	Other (specify):			\$	0	\$
				\$	0	\$
	Column Totals			\$		\$ 99,958,491
	Total payments Listed (column totals added)			X	\$ 99,958	3,491
		D. FEDERAL SIGNATU	RE	10 to		
00	s issuer has duly caused this notice to be signed by the urnstitutes an undertaking by the issuer to furnish to the U.S. the issuer to any non-accredited investor pursuant to para-	Securities and Exchange Comm	on. If this	s notice is filed under upon written request c	Rule 505, the	e following signature e information furnished
	uer (Print or Type) IM Partners Equity Fund I, LLC	Signature			Date May 14,	2004
N	me of Signer (Print or Type)	Title of Signer (Print or Type) Managing Partner of Alex. Br	own Inv	estment Manageme	nt, Manager	of the Fund

## **E. STATE SIGNATURE**

Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) ABIM Partners Equity Fund I, LLC	Signature Judan	Date May 15, 2004
Name of Signer (Print or Type) Lee S. Owen	Title of Signer (Print or Type) Managing Partner of Alex. Brown Investment Management, M	fanager of the Fund

#### Instruction:

Print the names and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manual not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX					
• 1		2	3	3 4						
	to non-a- investors	to sell ccredited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Amount purch	vestor and nased in State – Item 2)		Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E – Item 1		
State	Yes	No	Limited liability company interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR									ļ <u>.</u>	
CA										
СО									ļ	
СТ									ļ	
DE									<del>-</del>	
DC										
FL										
GA								-		
HI									-	
ID										
IL 									<del> </del>	
IN		1								
IA										
KS									-	
KY										
LA									<del> </del>	
ME			0.00.000		00.500.500					
MD	-	X	\$100,000,000	3	\$2,500,000	0	0	<del> </del>	X	
MA								<del> </del>	-	
MI		ļ							<del> </del>	
MN								<u> </u>	<del> </del>	
MS										
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				AP	PENDIX			<del></del>	
41	2		3		5	5			
	to non-a	I to sell ccredited s in State – Item 1)	offering price te offered in state (Part C – Item 1)  Number of  Type of investor and Amount purchased in State (Part C – Item 2)		Amount purchased in State				
State	Yes	No	Limited liability company interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE	,					·			<u> </u>
NV									
NH									
NJ									
NM									
NY									
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UT									
VT									
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PR		1	-			1			